

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | DPA | 64390 | 11-21-00 12-27-00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 101045 | 3-5-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|------------------|---------|
| Final Original 1 | 10/21 |
| 2 | 12/02 |
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| Claim | Date |
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| Final Original 51 | 12/02 |
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| 100 | V V V |

| Claim | Date |
|--------------------|-------|
| Final Original 101 | 12/02 |
| 102 | 12/02 |
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If more than 150 claims or 10 actions
staple additional sheet here

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